

CERTIFICATE OF AUTHENTICITY

I, Evelyn Vargas (Copy Abstractor) am employed by _____

My official title is **Keeper of Records**

I certify that each of the records attached hereto is the original or duplicate of the original records in the custody of West Lake Hospital in the name of Edwards, Donald for Date of Service 4/23/05

I further certify that:

- A) such records were made, at or near the time of the occurrence of the matters set forth, by (or from information transmitted by) a person with knowledge of those matters;
- B) such records were kept in the course of a regularly conducted business activity;
- C) the business activity made such records as a regular practice;
- D) if such record is not the original, such record is a duplicate of the original.

I certify under penalty of perjury, that the foregoing is true and correct.

Evelyn Vargas (Copy Abstractor)
 Signature

Executed on this 13 day of 2, 2008
 (day) (month) (year)

at Melrose Park, IL
 (city) (state)